

NORTH CAROLINA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES
FORM #2 STEVE TROXLER, COMMISSIONER
 APPLICATION FOR LICENSE/CERTIFICATE (NEW) **2015**

037	Type: 037 Pesticide Dealer <u>TO BE ADDED</u>	12/31/2015 Expiration Date
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<p>◆ Since you have passed your pesticide exam, you are eligible to be licensed ◆</p> <p>Instructions:</p> <ul style="list-style-type: none"> The information that you provide will be used to prepare your certification card. Provide your name, address, phone, county, & social security number(Required) Sign on the line at the bottom of the page after reading the attestation statement. (Required) Provide your exam serial number(s) Application should be returned with a check or money order in the amount of \$75.00 made payable to NCDA&CS. PLEASE DO NOT SEND CASH. 	<p>Please return this application with fee to:</p> <p>NCDA&CS Structural Pest Control & Pesticides Division Licensing Unit 1090 Mail Service Center Raleigh, NC 27699-1090 Phone: (919) 733-3556</p>
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Name:					
Company Name:					
Address:					
Address:					
City:		State		Zip Code	
Phone (Home):		Phone (Work):			
County:		Social Security Number:			
Exam Serial Number(s):					

SIGNATURE REQUIRED

X

APPLICANT'S SIGNATURE

No application is accepted unless signed by the applicant and accompanied by full payment.

FEE: \$75.00

Check or money order made payable to NCDA&CS.

FOR OFFICIAL USE ONLY. DO NOT WRITE IN THIS BOX

LType:

Certification Expires:

FNum:

Receipt#: